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CONFIRMATION NO. 5617

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|---|---|---------------------------|---|---|--------------------------|
| <b>SERIAL NUMBER</b><br>09/866,151  | <b>FILING OR 371(c) DATE</b><br>05/26/2001<br><b>RULE</b>   | <b>CLASS</b><br>348       | <b>GROUP ART UNIT</b><br>2621   | <b>ATTORNEY DOCKET NO.</b><br>SIP-116-A |                          |
| <b>APPLICANTS</b><br>Takaaki Nagai, Saitama-ken, JAPAN;<br>Shinichi Matsunaga, Saitama-ken, JAPAN;<br>Yoshiaki Sakagami, Saitama-ken, JAPAN;  |   |                           |   |   |                          |
| <b>** CONTINUING DATA *****</b>   |   |                           |   |   |                          |
| <b>** FOREIGN APPLICATIONS *****</b><br>JAPAN 2000-157299 05/26/2000<br>JAPAN 2001-124943 04/23/2001  |   |                           |   |   |                          |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 07/27/2001</b>  |   |                           |   |   |                          |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged |   | STATE OR COUNTRY<br>JAPAN | SHEETS DRAWING<br>13  | TOTAL CLAIMS<br>15                      | INDEPENDENT CLAIMS<br>12 |
| <b>ADDRESS</b><br>21828   |   |                           |   |   |                          |
| <b>TITLE</b><br>Position detection apparatus, position detection method and position detection program  |   |                           |   |   |                          |
| <b>FILING FEE RECEIVED</b><br>1930  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                           | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                          |